B1 (Official Form 1)(4/10)								
United S Middle District	States Bankr of North Caro			ptions)			Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Murry, LaShondra Marie	Middle):		Name	of Joint De	ebtor (Spouse	e) (Last, First, I	Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						Joint Debtor in trade names):	the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-8033	yer I.D. (ITIN) No./Co	omplete EIN		our digits o		r Individual-Ta	nxpayer I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. and Street, City, a 3251 Bristol Street Sanford, NC	nd State):	ZIP Code	Street	Address of	Joint Debtor	r (No. and Stre	et, City, and State):	ZIP Code
	2	7332	1					ZIF Code
County of Residence or of the Principal Place of Lee		7002	Count	y of Reside	ence or of the	Principal Plac	ee of Business:	1
Mailing Address of Debtor (if different from stre	et address):		Mailin	g Address	of Joint Debt	tor (if different	from street address):	
		ZIP Code	-					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	<u>'</u>							
Type of Debtor	Nature of	f Business			Chapter	r of Bankrupt	cy Code Under Whi	ch
(Form of Organization)	,	one box)			the l	Petition is File	ed (Check one box)	
(Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership	☐ Health Care Busi ☐ Single Asset Rea in 11 U.S.C. § 10 ☐ Railroad ☐ Stockbroker ☐ Commodity Brol ☐ Clearing Bank	al Estate as de 01 (51B)	efined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 9 er 11 er 12	of a □ Cha	apter 15 Petition for F Foreign Main Proce- apter 15 Petition for F Foreign Nonmain Pr	eding Recognition
Other (If debtor is not one of the above entities,	Other					Nature		
check this box and state type of entity below.)	Tax-Exen (Check box, ☐ Debtor is a tax-e under Title 26 of Code (the Interna	states "incurred by an individual primarily for						
Filing Fee (Check one box)	Check one	e box:		Chap	oter 11 Debtor	rs	
■ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.			otor is not otor's aggi- less than s applicable applicable alan is bein	a small busing regate nonco \$2,343,300 (constant) to boxes: ng filed with of the plan w	ness debtor as on ntingent liquida amount subject this petition.	ated debts (exclute to adjustment of the adjustment of the repetition from the attention	§ 101(51D). S.C. § 101(51D). uding debts owed to insi in 4/01/13 and every three one or more classes of co	ee years thereafter).
Statistical/Administrative Information ☐ Debtor estimates that funds will be available for distribution to unsecured creditors. ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						USE ONLY		
1- 50- 100- 200- 49 99 199 999] 5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$5 \$50,000 \$100,000 \$500,000 to \$1 ti million 1		to \$100 to] 100,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$0 to \$50,001 to \$100,001 to \$500,001 \$500,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million () (million [to \$100 to million m] 100,000,001 \$500 illion	\$500,000,001 to \$1 billion	\$1 billion	ge 1 of 96	0-	

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Murry, LaShondra Marie (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Case Number: Location Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ for John T. Orcutt October 29, 2010 Signature of Attorney for Debtor(s) (Date) for John T. Orcutt #10212 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(4/10) Page 3

Signatures

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Murry, LaShondra Marie

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7, I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ LaShondra Marie Murry

Signature of Debtor LaShondra Marie Murry

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

October 29, 2010

Date

Signature of Attorney*

X /s/ for John T. Orcutt

Signature of Attorney for Debtor(s)

for John T. Orcutt #10212

Printed Name of Attorney for Debtor(s)

The Law Offices of John T. Orcutt, PC

Firm Name

6616-203 Six Forks Road Raleigh, NC 27615

Address

Email: postlegal@johnorcutt.com (919) 847-9750 Fax: (919) 847-3439

Telephone Number

October 29, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaShondra Marie Murry		Case No.	
		Debtor ,		
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	208,680.00		
B - Personal Property	Yes	16	59,209.00		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	6		319,585.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	4		13,355.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	15		144,474.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			7,268.49
J - Current Expenditures of Individual Debtor(s)	Yes	3			7,268.49
Total Number of Sheets of ALL Schedu	ıles	49			
	T	otal Assets	267,889.00		
			Total Liabilities	477,414.00	

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaShondra Marie Murry		Case No		
		Debtor	Chapter	13	
			- ··· r	-	
	STATISTICAL SUMMARY OF C	ERTAIN LIABILITIES AN	D RELATED DA	ΓA (28 U.S.C. § 159)	

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	10,565.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	86,484.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	97,049.00

State the following:

Average Income (from Schedule I, Line 16)	7,268.49
Average Expenses (from Schedule J, Line 18)	7,268.49
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	11,288.16

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		60,303.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	13,355.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		144,474.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		204,777.00

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

Case No. (if known)

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re LaShondra Marie Murry		Case No.	
	Debtor(s)	Chapter	13
CERTIFICATION OF I UNDER § 342(b)	NOTICE TO CONSUM OF THE BANKRUPT		R(S)
Cer I hereby certify that I delivered to the debtor this	rtification of Attorney s notice required by § 342(b)	of the Bankrupto	ey Code.
for John T. Orcutt #10212	${ m X}$ /s/ for John T	. Orcutt	October 29, 2010
Printed Name of Attorney Address: 6616-203 Six Forks Road Raleigh, NC 27615 919) 847-9750 postlegal@johnorcutt.com	Signature of A	ttorney	Date
Coankruptcy Code.	ertification of Debtor ceived and read the attached	notice, as require	d by § 342(b) of the
LaShondra Marie Murry	X /s/ LaShondra	Marie Murry	October 29, 2010
Printed Name(s) of Debtor(s)	Signature of D	ebtor	Date

Signature of Joint Debtor (if any)

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Date

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In r	e LaShondra Marie Murry		Case I	No	
		Debtor(s)	Chapte	er 13	
	DISCLOSURE OF COMI	PENSATION OF ATTOI	RNEY FOR	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptc	y, or agreed to be	paid to me, for services rend	
	For legal services, I have agreed to accept		\$	3,000.00	
	Prior to the filing of this statement I have received			210.00	
	Balance Due		\$	2,790.00	
2.	\$of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed of firm.	compensation with any other persor	unless they are	members and associates of my	y law
	☐ I have agreed to share the above-disclosed components copy of the agreement, together with a list of the				firm. A
6.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspec	cts of the bankru	otcy case, including:	
	a. Analysis of the debtor's financial situation, and tob. Preparation and filing of any petition, schedulesc. Representation of the debtor at the meeting of cod. [Other provisions as needed]	, statement of affairs and plan which reditors and confirmation hearing, a	ch may be require and any adjourne	d; d hearings thereof;	otcy;
	Exemption planning, Means Test place contract or required by Bankruptcy		cifically include	led in attorney/client fee	
7.	By agreement with the debtor(s), the above-disclose Representation of the debtors in any other adversary proceeding, and Bankruptcy Court local rule.	y dischareability actions, judi	cial lien avoida	ances, relief from stay ac t fee contract or excluded	tions or d by
	Fee also collected, where applicable each, Judgment Search: \$10 each, 0 Class Certification: Usually \$8 each Class: \$10 per session, or paralegal	Credit Counseling Certification, Use of computers for Credit	n: Usually \$34 Counseling bi	per case, Financial Mana iefing or Financial Mana	igement gment
		CERTIFICATION			
this	I certify that the foregoing is a complete statement obankruptcy proceeding.	of any agreement or arrangement for	or payment to me	for representation of the debt	or(s) in
Date	ed: October 29, 2010	/s/ for John T. O			
		for John T. Orcu			
		The Law Offices 6616-203 Six For		utt, PC	
		Raleigh, NC 2761	5		
		(919) 847-9750 i postlegal@johno		3439	
Ь		postiegai @joiiiic	- Cutt.COIII		

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaShondra Marie Murry		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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Best Case Bankruptcy

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental
deficiency so as to be incapable of realizing and making rational decisions with respect to financial
responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ LaShondra Marie Murry
LaShondra Marie Murry
Date: October 29, 2010

In re	LaShondra Marie Murry	Case No	_
		,	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband**		-	208,680.00	220,000.00
Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband**		-	0.00	3,000.00
Valuation Method (Sch. A & B) : FMV unless otherwise noted.		-	0.00	0.00

Sub-Total > 208,680.00 (Total of this page)

Total > 208,680.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)
Page 12 of 90

Filed 10/29/10

In re	LaShondra	Marie	Murr
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Case No.		

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	х		
2.	accounts, certificates of deposit, or	Patelco Credit Union (Checking Account) **Debtor has 1/2 Interest with Husband**	-	200.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or	Branch Banking & Trust (Checking Account) **Debtor has 1/2 Interest with Husband**	-	300.00
	cooperatives.	Branch Banking & Trust (Savings Account) *1/2 interest with daughter	-	420.00
		Wachovia Bank (Checking Account)	-	0.00
		Fidelity MySmart Cash Account **Debtor has 1/2 Interest with Husband**	-	12.00
		Health Care Reimbursement Account	-	1,200.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	-	4,775.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Paintings/Art	-	150.00
6.	Wearing apparel.	Clothing/Personal	-	800.00
7.	Furs and jewelry.	Jewelry	-	450.00
8.	Firearms and sports, photographic, and other hobby equipment.	Recreational Equipment	-	300.00

3 continuation sheets attached to the Schedule of Personal Property

8,607.00

Sub-Total >

(Total of this page)

n re	LaShondra	Maria	Murry
ln re	LaSnonura	warie	wurr

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	х			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		CVS 401K Retirement Account (approximate value: \$5,000.00) (Current Loan Balances = \$3,542.73)	-	0.00
			Fidelity Rollover IRA (approximate value: \$1.00)	-	0.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
			(Total	Sub-Tota	al > 0.00

Sheet __1__ of __3__ continuation sheets attached

In re LaShondra Marie Murry

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Possi	ble Consumer Rights Claims	-	Unknown
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	(-\$525 VIN#: State 7341-	Ford Edge SEL (66,000 miles) of for mileage) 2FMDK38C07BA30180 Farm Auto Insurance-policy # 85 B07-33A tor has 1/2 Interest with Husband**	-	17,010.00
		VIN #: State	Toyota Camry SE Sedan 4dr. : 4T1BE46K57U633789 Farm Auto Insurance-policy # 85 B07-33A	-	13,657.00
		VIN #: State	Toyota Sequoia SR5 4WD Utility : 5TDBT44AX3S166098 Farm Auto Insurance-policy # 85 B07-33A	-	13,275.00
26.	Boats, motors, and accessories.	2008 Traile	Tracker Marine Pro Team 17' Outboard Boat & r		6,660.00
27.	Aircraft and accessories.	X			
				Sub-Tota	al > 50,602.00

(Total of this page)

Sheet **2** of **3** continuation sheets attached

In re	LaShondra	Marie	Murry
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SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
28.	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

Total > 59,209.00

0.00

UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: LaShondra Marie Murry		Case No	
Social Security No.: xxx-xx-8033 Address: 3251 Bristol Street, Sanford, NC 27332	Debtor.	_	Form 91C (rev. 12/20/09)

DEBTOR'S CLAIM FOR PROPERTY EXEMPTIONS

The undersigned Debtor hereby claims the following property as exempt pursuant to 11 U.S.C. Sections 522(b)(3)(A),(B), and (C), the North Carolina General Statues, and non-bankruptcy federal law.

1. RESIDENCE EXEMPTION: REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT.

Each debtor can retain an aggregate interest in such property, not to exceed a total net value of \$35,000. (N.C.G.S. § 1C-1601(a)(1) (NC Const. Article X, Section 2)(See * below)

Description of	Market	Mortgage Holder or	Amount of	Net
Property & Address	Value	Lien Holder	Mortgage or Lien	Value
House & Land: 3251 Bristol Street Sanford, NC 27332 **Debtor has 1/2 Interest with Husband**	\$208,680.00	Wells Fargo Home Mtg Sedgemoor Property Owners'	\$220,000.00 \$0.00	-Below- \$0.00

TOTAL NET VALUE:	\$0.00
VALUE CLAIMED AS EXEMPT:	\$30,000.00
UNUSED AMOUNT OF EXEMPTION:	\$5,000.00

\$0.00

\$0.00

\$0.00

RESIDENCE EXEMPTION: REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT.

Exception to \$18,500 limit: An unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in property **not** to exceed \$60,000 in net value, so long as: (1) the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and (2) the <u>former co-owner of the property is deceased</u>, in which case the debtor must specify his/her age and the name of the former co-owner (if a child use initials only) of the property below. (N.C.G.S. § 1C-1601(a)(1) (NC Const. Article X, Section 2)(See * below)

Description of	Market	Mortgage Holder or	Amount of	Net
Property & Address	Value	Lien Holder	Mortgage or Lien	Value
None	minus 6%			\$0.00

Debtor's Age:	TOTAL NET VALUE:	
Name of former co-owner:	VALUE CLAIMED AS EXEMPT:	
	UNUSED AMOUNT OF EXEMPTION:	

^{*} Note to all interested parties: Notwithstanding the above, in the event that: (1) this concerns a Chapter 13 case filed within 12 months after the Filed 10/29/10 Page 17 of 90

dismissal of a prior bankruptcy case, and (2) a creditor has, prior to the filing of this case, taken an "action" as that term is defined in <u>In re: Paschal</u>, 337 B.R. 27 (2006), the debtor(s) do not claim the property as exempt, in which case the above information is provided for the sole purpose of determining compliance as required by 11 U.S.C. 1325(a)(4).

2. **TENANCY BY THE ENTIRETY:** All the net value in the following property is claimed as exempt pursuant to 11 U.S.C. § 522(b)(3)(B) and the law of the State of North Carolina pertaining to property held as tenants by the entirety. (No limit on amount or number of items.)(See * above which shall also apply with respect to this exemption.)

Description of Property & Address
1.
2.

3. MOTOR VEHICLE EXEMPTION: Each debtor can claim an exemption in only one vehicle, not to exceed \$3,500.00 in net value. (N.C.G.S. § 1C-1601(a)(3))

Year, Make, Model, Style of Motor Vehicle	Market Value	Lien Holder	Amount of Lien	Net Value
2003 Toyota Sequoia SR5 4WD Utility	\$13,275.00	1) Patelco Credit Union 2) Patelco Credit Union 3) Patelco Credit Union 4) Patelco Credit Union	\$21,383.00 \$12,301.00 \$7,837.00 \$7,7272.00	-Below- -Below- -Below- \$0.00

TOTAL NET VALUE:	\$0.00
VALUE CLAIMED AS EXEMPT:	\$3,500.00

4. TOOLS OF TRADE, IMPLEMENTS, OR PROFESSIONAL BOOKS: (Each debtor can retain an aggregate interest, not to exceed \$2,000.00 in net value.) (N.C.G.S. § 1C-1601(a)(5))

Description	Market Value	Lien Holder	Amount of Lien	Net Value
None				\$0.00

TOTAL NET VALUE:	\$0.00
VALUE CLAIMED AS EXEMPT:	\$0.00

5. **PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES:** Each debtor can retain a total aggregate interest, not to exceed \$5,000.00 in net value, <u>plus</u> \$1000.00 in net value for each dependent of the debtor (not to exceed \$4,000 total for dependents.) (N.C.G.S. § 1C-1601(a)(4) & NC Const., Article X, Section 1)

The number of dependents for exemption purposes is:___TWO_____

Description of Property	Market Value	Lien Holder	Amount of Lien	Net Value
Clothing & Personal				\$800.00
Kitchen Appliances				\$200.00
Stove				\$75.00
Refrigerator				\$350.00
Freezer				\$300.00
Washing Machine				\$500.00

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Description

\$50.00

8. COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR THE DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. There is no limit on this exemption. All such amounts are claimed as exempt. (The compensation is not exempt from related legal, health or funeral expenses.) (N.C.G.S. § 1C-1601(a)(8))

Description		Source of Compensation	1	Digits of count Number
Possible Consumer Rights Claims*				
*The debtor [or female debtor or male \$ 1C-1601 (a)(8)] in a personal injurpoecause the claim is pending and hat Bankruptcy Court, upon the filing of an Amendment to this Schedule C, to law, or to the extent that it is found available to the debtor under another time within which the trustee may obtaine as the Motion and Amendment 1. INDIVIDUAL RETIREMENT PLA THE SAME MANNER AS AN INDIVIDUAL (10) (10) (10) (10) (10) (10) (10) (10)	y claim so s not been a Motion to be in the exemption ject to the are filed NS AS DEI VIDUAL In amount.).	cheduled in Schedule En liquidated) only to the for Approval of Settler enature of a personal inter than a personal injury, such as the wildcard claiming of any exempland served upon the trefined in the Interner enaction.	B, ¶ 21, (currently valued at \$0 to extent that the settlement/awment/Award and for Allowance injury claim, if allowed as exemptary claim only to the extent of exemption, under applicable extend in this asset, shall be deen sustee. AL REVENUE CODE AND ANY NDER THE INTERNAL REVENU	.00 [or "unknown" ward is found by the of Exemptions and applicable of the dollar amount xemptions law. The ned tolled until such plan treated in UE CODE. (N.C.G.S.
10. COLLEGE SAVINGS PLANS QUA to exceed \$25,000. If funds were place made in the ordinary course of the deb The exemption applies to funds for a ch \$ 1C-1601(a)(10))	LIFIED Und in a collegion's financi	ge savings plan within the 1 al affairs <u>and</u> must have be	2 months prior to filing, such contri en consistent with the debtor's past p	butions must have bee pattern of contributions
College Savings Plan		Last 4 Digits of Account Number	Initials of Child Beneficiary	Value
	1		ALUE CLAIMED AS EXEMPT:	
11. RETIREMENT BENEFITS UNDER OTHER STATES. (The debtor's int governmental unit under which the ben	erest is exe	empt only to the extent th	at these benefits are exempt under	
Name of Retirement Plan	State	or Governmental Unit	Last 4 Digits of Identifying Number	Value
				1
		V	ALUE CLAIMED AS EXEMPT:	
12. ALIMONY, SUPPORT, SEPARATE RECEIVED OR TO WHICH THE I reasonably necessary for the support of	DEBTOR I	NANCE, AND CHILD SU S ENTITLED (The debtor	JPPORT PAYMENTS OR FUNDS 's interest is exempt to the extent the	
RECEIVED OR TO WHICH THE I	DEBTOR I	NANCE, AND CHILD SU S ENTITLED (The debtor or any dependent of the de	JPPORT PAYMENTS OR FUNDS 's interest is exempt to the extent the	
RECEIVED OR TO WHICH THE I reasonably necessary for the support of	DEBTOR I	NANCE, AND CHILD SU S ENTITLED (The debtor or any dependent of the de	JPPORT PAYMENTS OR FUNDS T's interest is exempt to the extent the obtor.) (N.C.G.S. § 1C-1601(a)(12))	e payments or funds ar

13. **WILDCARD EXEMPTION:** Each debtor can retain a total aggregate interest in any other property, not to exceed a net value of \$5,000.00, or the unused portion of the debtor's <u>residence</u> exemption, <u>whichever is less</u>. (N.C.G.S. § 1C-1601(a)(2))

Description of the Property	Market Value	Lien Holder	Amount of Lien	Net Value
Any property owned by the debtor(s), not otherwise claimed as exempt.				\$3,334.00
Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband**	\$0.00	1) Palace View South 2) Palace View South (Property Owners' Assoc Dues)	\$3,000.00 \$0.00	-Below- \$0.00
Patelco Credit Union (Checking Account) **Debtor has 1/2 Interest with Husband**				\$200.00 **Debtor's 1/2 Interest = \$100.00
Branch Banking & Trust (Checking Account) **Debtor has 1/2 Interest with Husband**				\$300.00 **Debtor's 1/2 Interest = \$150.00
Fidelity MySmart Cash Account **Debtor has 1/2 Interest with Husband**				\$12.00 **Debtor's 1/2 Interest = \$6.00
Branch Banking & Trust Company (Savings Account) **Debtor has 1/2 Interest with Daughter**				\$420.00 **Debtor's 1/2 Interest=\$210.00
Wachovia Bank (Checking Account)				\$0.00
Health Care Reimbursement Account				\$1,200.00
2007 Ford Edge SEL **Debtor has 1/2 Interest with Husband**	\$17,010.00	Ford Motor Credit	\$18,813.00	\$0.00
2007 Toyota Camry SE Sedan 4dr.	\$13,657.00	Toyota Financial Services	\$17,376.00	\$0.00
2008 Tracker Marine Pro Team 17' Outboard Boat & Trailer	\$6,660.00	Commerce Bank	\$11,603.00	\$0.00
Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband**	\$0.00	1) Palace View South 2) Palace View South	\$3,000.00 \$0.00	-Below- \$0.00

TOTAL NET VALUE:	\$5,000.00
VALUE CLAIMED AS EXEMPT:	\$5,000.00

14. OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:

	Amount
Aid to the Aged, Disabled and Families with Dependent Children N.C.G.S. § 108A-36	
Aid to the Blind N.C.G.S. § 111-18	
Yearly Allowance of Surviving Spouse N.C.G.S. § 30-15	
North Carolina Local Government Employees Retirement Benefits N.C.G.S. § 128-31	

North Carolina Teachers and State Employee Retirement Benefits N.C.G.S. § 135	j-9	
Fireman's and Rescue Workers' Pensions N.C.G.S. § 58-86-90		
Workers Compensation Benefits N.C.G.S. § 97-21		
Unemployment benefits, so long as not commingled and except for debts for nece N.C.G.S. § 96-17_	essities purchased while unemployed	
Group Insurance Proceeds N.C.G.S. § 58-58-165		
Partnership Property, except on a claim against the partnership N.C.G.S. § 59-55		
Wages of Debtor necessary for the support of family N.C.G.S. § 1-362		
	VALUE CLAIMED AS EXEMPT:	
15. EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDE	RAL LAW:	
		Amount
Foreign Service Retirement and Disability Payments 22 U.S.C. § 4060		
Social Security Benefits 42 U.S.C. § 407		
Injury or death compensation payments from war risk hazards 42 U.S.C. §	3 1717	
Wages of Fishermen, Seamen and Apprentices, 46 U.S.C. § 11108 &1110	09	
Civil Service Retirement Benefits 5 U.S.C. § 8346		
Longshoremen and Harbor Workers Compensation Act death and disabili	ty benefits 33 U.S.C. § 916	
Railroad Retirement Act annuities and pensions 45 U.S.C. § 231m		
Veteran benefits 38 U.S.C. § 5301		
Special pension paid to winners of Congressional Medal of Honor 38 U.S.C. § 15	62	
	VALUE CLAIMED AS EXEMPT:	
UNSWORN DECLARATION UNDE	R PENALTY OF PERJURY	
I, the undersigned Debtor, declares under penalty of perjury that I have read to pages, and that they are true and correct to the best of my knowledge, information of the second	he foregoing document, consisting of 14 para	graphs on consecutive
Dated: October 28, 2010		
-	s/ LaShondra Marie Murry aShondra Marie Murry	

UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: LaShondra Marie Murry	PROPOSED CHAPTER 13 PLAN
Social Security No.: xxx-xx-8033	Case No.
Address: 3251 Bristol Street, Sanford, NC 27332	Chapter 13
	Debtor.

The Debtor proposes an initial plan, which is subject to modification, as follows:

This document and the attached CH. 13 PLAN - DEBTS SHEET (MIDDLE) shall, together, constitute the proposed plan; and all references herein are to corresponding sections of said attached document. The terms and conditions of this proposed plan shall control and apply except to the extent that they contradict the terms and conditions of the order confirming the Chapter 13 plan entered by this Court in this case:

- 1. **Payments to the Trustee**: The Debtor proposes to pay to the Trustee from future earnings consecutively monthly payments, for distribution to creditors after payment of costs of administration. See "**PROPOSED PLAN PAYMENT**" section for amount of monthly payment and the duration. Actual duration will be determined in accordance with the provisions set forth in the Paragraph 2 below.
- 2. **Duration of Chapter 13 Plan**: at the earlier of, the expiration of the Applicable Commitment Period or the payment to the Trustee of a sum sufficient to pay in full: (A) Allowed administrative priority claims, including specifically the Trustee's commissions and attorneys' fees and expenses ordered by the Court to be paid to the Debtor's Attorney, (B) Allowed secured claims (including but not limited to arrearage claims), excepting those which are scheduled to be paid directly by the Debtor "outside" the plan, (C) Allowed unsecured priority claims, (D) Cosign protect consumer debt claims (only where the Debtor proposes such treatment), (E) Post-petition claims allowed under 11 U.S.C. § 1305, (F) The dividend, if any, required to be paid to non-priority, general unsecured creditors (not including priority unsecured creditors) pursuant to 11 U.S.C. § 1325(b)(1)(B), and (G) Any extra amount necessary to satisfy the "liquidation test" as set forth in 11 U.S.C. § 1325(a)(4).
- 3. Payments made directly to creditors: The Debtor proposes to make regular monthly payments directly to the following creditors: See "RETAIN COLLATERAL & PAY DIRECT OUTSIDE PLAN" section. It shall not be considered a violation of the automatic stay if, after the bankruptcy filing, a secured creditor sends to the Debtor payment coupon books or monthly payment invoices with respect to debts set forth in this section of the plan.
- 4. <u>Disbursements by the Trustee</u>: The Debtor proposes that the Trustee make the following distributions to creditors holding allowed claims, after payment of costs of administration as follows: See "INSIDE PLAN" section. More specifically:
 - a. The following secured creditors shall receive their regular monthly contract payment: See "LTD Retain / DOT on Principal Res./Other Long Term Debts" section. At the end of the plan, the Debtor will resume making payments directly to the creditor on any such debt not paid in full during the life of the plan.
 - b. The following secured creditors shall be paid in full on their arrearage claims over the life of the plan on a pro-rata basis with other secured claims (not including LTD claims): See "Arrearage Claims" section.
 - c. The following creditors have partially secured and partially unsecured claims. The secured part of the claim shall be paid in full over the life of the plan on a pro-rata basis with other secured claims (not including LTD claims): See "STD Retain/Secured Debts (Paid at FMV)" and "Secured Taxes" sections.
 - d. The following secured creditors shall be paid in full over the life of the plan on a pro-rata basis with other

- secured claims (not including LTD claims): See "STD Retain / Secured Debts & 910 Vehicles (Pay 100%)" section.
- e. The following priority claims shall be paid in full by means of deferred payment: See "Unsecured Priority Debts" section.
- f. The following co-signed claims shall be paid in full by means of deferred payments: See "Cosign Protect Debts (Pay 100%)" section.
- g. After payment of allowed costs of administration, priority and secured claims, the balance of the funds paid to the Trustee shall be paid to allowed, general unsecured, non-priority claims. See "General Unsecured Non-Priority Debts" section.
- 5. **Property to be surrendered**: The Debtor proposes to retain all property serving as collateral for secured claims, except for the following property, which shall be surrendered to the corresponding secured creditor(s): See "**SURRENDER COLLATERAL**" section. Unless an itemized Proof of Claim for any deficiency is filed within 120 days after confirmation of this plan, said creditor shall not receive any further disbursement from the trustee. Any personal property serving as collateral for a secured claim which is surrendered, either in the confirmation order or by other court order, which the lien holder does not take possession of within 240 days of the entry of such order shall be deemed abandoned and said lien cancelled.
- 6. **Executory contracts**: The Debtor proposes to assume all executory contracts and leases, except those specifically rejected. See "**REJECTED EXECUTORY CONTRACTS** / **LEASES**" section.
- 7. Retention of Consumer Rights Causes of Action: Confirmation of this plan shall constitute a finding that the Debtor does not waive, release or discharge but rather retains and reserves for himself and the Chapter 13 Trustee any and all pre-petition claims and any and all post-petition claims that he could or might assert against any party or entity arising under or otherwise related to any state or federal consumer statute or under state or federal common law including but not limited to fraud, misrepresentation, breach of contract, unfair and deceptive acts and practices, retail installment sales act violations, Truth in Lending violations, Home Equity Protection Act violations, Real Estate Settlement Protection Act violations, Fair Debt Collection Practices Act violations, Fair Credit Reporting Act violations, Equal Credit Opportunity Act violations, Fair Credit Billing Act violations, Consumer Leasing Act violations, Federal Garnishment Act violations, Electronic Funds Transfer Act violations, and any and all violations arising out of rights or claims provided for by Title 11 of the United States Code, by the Federal Rules of Bankruptcy Procedure, or by the Local Rules of this Court.
- 8. Standing for Consumer Rights Causes of Action: Confirmation of this plan shall vest in the Debtor full and complete standing to pursue any and all claims against any parties or entities for all rights and causes of action provided for under or arising out of Title 11 of the United States Code including but not limited to the right to pursue claims for the recovery of property of this estate by way of turnover proceedings, the right to recover prepetition preferences, the right to pursue automatic stay violations, and the right to pursue discharge violations.
- 9. Termination of Liens: Upon the full payment of a secured party's underlying debt determined under non-bankruptcy law or the granting of a discharge pursuant to 11 U.S.C. § 1328, the secured party shall within 10 days after demand and, in any event, within 30 days, execute a release of its security interest on the property securing said claim. In the case of a motor vehicle, said secured creditor shall execute a release on the title thereto in the space provided therefore on the certificate or as the Division of Motor Vehicles prescribes, and mail or deliver the certificate and release to the Debtor or the Debtor's Attorney. Confirmation of this plan shall impose an affirmative and direct duty on each such secured party to comply with the provision and upon failure to so comply. This provision may be enforced in a proceeding filed before the Bankruptcy Court and each such creditor consents to such jurisdiction by failure to file any timely objection to this plan. Such an enforcement proceeding may be filed by the Debtor in this case either before or after the entry of the discharge order and either before or after the closing of this case. The Debtor specifically reserves the right to file a motion to reopen this case under 11 U.S.C. § 350 to pursue the rights and claims provided for herein.
- 10. <u>Jurisdiction for Non-Core Matters</u>: Confirmation of this plan shall constitute the expressed consent by any party in interest in this case, or any one or more of them, including all creditor or other parties duly listed in Schedules D, E, F, G, and H, or any amendments thereto, to the referral of a proceeding related to a case under Title 11 of the United States Code to a Bankruptcy Judge to hear and determine and to enter

- appropriate orders and judgments as provided for by 28 U.S.C. § 157(c)(2).
- 11. **Obligations of Mortgagors**: Confirmation of this plan shall impose an affirmative duty on the holders of all claims secured by mortgages or deeds of trust on real property of this estate to:
 - a. Pursuant to 11 U.S.C. § 1326, adequate protection payments shall not be made on allowed secured claims secured by real property prior to confirmation. This provision shall not preclude such a claim-holder from requesting additional adequate protection pursuant to 11 U.S.C. § 362(d);
 - b. Apply any payments received from the Trustee under the plan as the same is designated by the Trustee only to the pre-petition arrears provided for in the confirmed plan;
 - c. Apply any payments received from the Trustee under the plan as the same is designated by the Trustee, that is to either pre-petition interest or pre-petition principal as the case may be;
 - d. Apply all post-petition payments received from the Chapter 13 Trustee under the plan as the same is designated by the Trustee, to the post-petition mortgage obligations of the Debtor for the actual months for which such payments are designated;
 - e. Apply all post-petition payments received directly from the Debtor to the post-petition mortgage obligations due;
 - f. Refrain from the practice of imposing late charges when the only delinquency is attributable to the prepetition arrears included in the plan;
 - g. Refrain from the imposition of monthly inspection fees or any other type of bankruptcy monitoring fee without prior approval of the Bankruptcy Court after notice and hearing;
 - h. Refrain from the imposition of any legal or paralegal fees or similar charges incurred following confirmation without prior approval of the Bankruptcy Court after notice and hearing;
 - i. Pursuant to 12 U.S.C. § 2609, 15 U.S.C. § 1602, and all other applicable state, federal and contractual requirements, promptly notify the Debtor, the Debtor's Attorney and the Chapter 13 Trustee of any adjustment in the on-going payments for any reason, including, without limitation, changes resulting for Adjustable Rate Mortgages and/or escrow changes. The Debtor specifically agrees that provision of such notice shall not constitute a violation of 11 U.S.C. § 362;
 - j. Pursuant to 11 U.S.C. § 524 and all other applicable state and federal laws, verify, at the request of the Debtor, Debtor's Attorney or Chapter 13 Trustee, that the payments received under the confirmed plan were properly applied;
 - k. Pursuant to N.C.G.S. § 45-91 and all other applicable state, federal and contractual requirements notify the Debtor, the Debtor's Attorney and the Chapter 13 Trustee with notice of the assessment of any fees, charges etc. The Debtor specifically agrees that provision of such notice shall not constitute a violation of 11 U.S.C. § 362; and
 - 1. This provision of this plan may be enforced in a proceeding filed before the Bankruptcy Court and each such secured creditor consents to such jurisdiction by failure to file any timely objection to this plan. Such an enforcement proceeding may be filed by the Debtor in this case either before or after the entry of the discharge order and either before or after the closing of this case. The Debtor specifically reserves the right to file a motion to reopen this case under 11 U.S.C. § 350 to pursue the rights and claims herein.
- 12. **Arbitration**: Acceptance by creditors of payments under this plan and/or failure of any creditor to file an objection to confirmation of the plan herein, constitutes waiver of any right(s) of said creditor(s) to seek enforcement of any arbitration agreement and constitutes consent to the removal of any arbitration clause from any type of contract or contracts with the Debtor herein during the pendency of this case.
- 13. Post-petition tax claims: The Debtor's plan shall provide for full payment of any post-petition tax claim filed by the Internal Revenue Service which are allowed pursuant to 11 U.S.C. § 1305 (b), unless the Internal Revenue Service, after a good faith consideration of the effect such a claim would have on the feasibility of the Debtor's Chapter 13 plan, specifically agrees to a different treatment of such claim. However, any future modification of the Debtor's plan to provide for full payment of any allowed post-petition tax claim shall only occur after the filing of a motion requesting a modification of the plan to that effect.
- 14. Offers in Compromise: The Internal Revenue Service shall, pursuant to I.R.C. §7122 (a) (2002) and 11

U.S.C. §§105 and 525 (a), and notwithstanding any provisions of the Internal Revenue Manual, consider any properly tendered Offer in Compromise by the Debtor. This provision shall not be construed to require the Internal Revenue Service to accept any such Offer in Compromise, but the Internal Revenue Service shall consider such Offer in Compromise as if the Debtor was not in an on-going bankruptcy. In the event that an Offer in Compromise is accepted by the Internal Revenue Service and any tax obligation is reduced, the Chapter 13 Trustee shall review the Chapter 13 payment to determine if a reduction in the plan payment is feasible.

- 15. <u>Adequate Protection Payments</u>: The Debtor proposes that all pre-confirmation adequate protection payments be paid as follows:
 - a. Not later than 30 days after the date of the order for relief, the Debtor shall commence paying directly to the lessor all payments scheduled in a lease of personal property or portion thereof that become due after the said order for relief. Absent a timely objection to confirmation of the proposed plan, it shall be presumed that the Debtor has made such payments as required by 11 U.S.C. § 1326(a)(1)(B) of the Bankruptcy Code.
 - b. All pre-confirmation adequate protection payments required by 11 U.S.C. § 1326(a)(1)(c) payable to a creditor holding an allowed claim secured by personal property, to the extent that the claim is attributable to the purchase of such property by the Debtor shall be disbursed by the Chapter 13 Trustee.
 - c. Each creditor entitled to receive a pre-confirmation adequate protection payment pursuant to 11 U.S.C. § 1326(a)(1)(c) shall be paid each month the amount set forth in the column entitled "Adequate Protection". These amounts shall equal 1.00% of the FMV of the property securing the corresponding creditor's claim or the monthly amount necessary to amortize the claim (computed at the Trustee's interest rate) over the life of the plan, whichever is less.
 - d. The principal amount of the adequate protection recipient's claim shall be reduced by the amount of the adequate protection payments remitted to the recipient.
 - e. All adequate protection payments disbursed by the Chapter 13 Trustee shall be subject to an administrative fee in favor of the Trustee equal to the Trustee's statutory percentage commission then in effect, and the Trustee shall collect such fee at the time of the distribution of the adequate protection payment to the creditor.
 - f. All adequate protection payments disbursed by the Chapter 13 Trustee shall be made in the ordinary course of the Trustee's business from funds in this case as they become available for distribution.
 - g. No adequate protection payment to a creditor who is listed in the plan as a secured creditor shall be required until a proof of claim is filed by such creditor which complies with Rule 3001 of the Federal Rules of Bankruptcy Procedure.
 - h. The Trustee shall not be required to make pre-confirmation adequate protection payments on account of any claim in which the collateral for such claim is listed in the plan as having a value of less than \$2,000.00.
 - i. The names, addresses and account numbers for each secured creditor entitled to receive a pre-confirmation adequate protection payment as set forth on Schedule D filed in this case are incorporated herein, as if set forth herein at length.
 - j. Adequate protection payments shall continue until all unpaid Debtor's Attorney's fees are paid in full.

16. **Interest on Secured Claims**:

- a. Arrearage: No interest shall accrue on any arrearage claim.
- b. Secured Debts Paid at FMV: The lesser of Trustee's interest rate (set pursuant to *In re Till*) and the contract interest rate.
- c. Secured Debts Paid in Full:
 - i. Regarding "910 vehicle" claims: Pursuant to 11 U.S.C. §1322, interest only to the extent that the value, as of the effective date of the plan (hereinafter the "Time Value"), of the motor vehicle exceeds the amount of the claim. The Time Value shall be the total of the payments to amortize the FMV of the motor vehicle, defined as 90% of the N.A.D.A. Retail, at the Trustee's interest rate over the total length of the Chapter 13 plan.
 - ii. All other secured claims: The lesser of the Trustee's interest rate and the contract interest rate.
- 17. **Debtor's Attorney's Fees**: In the event that the Trustee has, at the time of Confirmation, funds in excess

- of any amounts necessary to make adequate protection payments to holders of allowed secured claims for personal property, specifically excluding payments for real property due between the filing of the petition and Confirmation, all such funds shall be paid towards unpaid Debtor's Attorney's fees.
- 18. **Non-Vesting:** Property of the estate shall NOT re-vest in the Debtor upon confirmation of the Chapter 13 plan.
- 19. **Real Estate Taxes** Real estate taxes that are paid by the Debtor through an escrow account as part of any direct mortgage payment, or as part of a conduit payment made by the Trustee, shall continue to be paid by the Debtor through such escrow account and shall be disbursed by the servicer from such escrow account. They shall not be made separately by the Trustee.
- 20. <u>Transfer of Mortgage Servicing</u>: Pursuant to 12 U.S.C. § 2605(f), in the event that the mortgage servicing for any of the Debtor's mortgages is transferred during this case, notice of such transfer of service shall be provided to the Debtor, the Debtor's Attorney and the Chapter 13 Trustee within thirty (30) days. Such notice shall include the identity of the new servicer, the address and a toll-free telephone number for the new servicer, instructions on whom to contact with authority regarding such servicing, and the location where the transfer of mortgage servicing is recorded.
- 21. Other provisions of plan (if any): See "OTHER PROVISIONS" section.

Definitions

LTD: Long Term Debt and refers to both: (1) Debts which cannot be modified due to 11 U.S.C. §

1322(b)(2), and (2) Debts where modification in the plan will not result in a payment lower than the

contract payment.

STD: Short Term Debt and refers to debts where the months left on the contract are less than or equal to

60 months.

Retain: Means the Debtor intends to retain possession and/or ownership of the collateral securing a debt.

910: Means and refers to the purchase money security interest portion of a claim secured by a motor

vehicle, where the motor vehicle was acquired within 910 days before the filing of the bankruptcy

case for the personal use of the Debtor.

Sch D #: References the number of the secured debt as listed on Schedule D.

Int. Rate: Means Interest Rate to be paid a secured claim.

Dated: October 28, 2010

s/LaShondra Marie Murry

LaShondra Marie Murry

(rev. 3/25/2010)

10/26/10 CH. 13 PLAN - DEBTS SHEET Date: (MIDDLE DISTRICT - DESARDI VERSION) Lastname-SS#: Murry-8033 RETAIN COLLATERAL & PAY DIRECT OUTSIDE PLAN SURRENDER COLLATERAL Description of Collateral Creditor Name **Description of Collateral** Creditor Name Sch D# Lee Co./CPI/Terminix 3 Tax/Executory Contracts None Palace View South 4 TimeShare Ret Palace View South 5 TimeShare POA Wells Fargo Home Mtg House & Lot: 12 Sedgemoor Property Owners House & Lot: HOA 10 ARREARAGE CLAIMS REJECTED EXECUTORY CONTRACTS/LEASES Arrearage **Creditor Name** Sch D # (See †) Creditor Name **Description of Collateral** Amount ** NONE Lee Co./CPI/Terminix 3 Palace View South 4 Palace View South 5 ** Retain Wells Fargo Home Mtg 12 Sedgemoor Property Owners ** 10 NONE ** ** ** LTD - DOT ON PRINCIPAL RESIDENCE & OTHER LONG TERM DEBTS Minimum Monthly Adequate Creditor Name Sch D# Int. Rate Description of Collateral Protection **Equal Payment** NONE N/A n/a N/A n/a N/A n/a N/A n/a STD - SECURED DEBTS @ FMV Adequate Minimum **Description of Collateral** Creditor Name Sch D# **FMV** Int. Rate **Equal Payment** Protection Commerce Bank \$6,660 5.00 \$67 \$131.80 2008 Tracker Marine Pro Boat Retain Patelco Credit Union 6/7/8/9 \$13,275 5.00 \$133 \$262.71 All liens on 2003 Toyota Sequo \$170 Ford Motor \$17.010 5.00 2007 Ford Edge SEL 2 \$336.63 \$13,657 5.00 \$137 \$270.27 2007 Toyota Camry SE Toyota Financial 11 STD - SECURED DEBTS @ 100% Minimum Payoff Adequate Creditor Name Sch D# Int. Rate **Description of Collateral** Protection **Equal Payment** Amount NONE Retain 5.00 5.00 5.00 ATTORNEY FEE (Unpaid part) Amount PROPOSED CHAPTER 13 PLAN PAYMENT Law Offices of John T. Orcutt, P.C \$2,790 SECURED TAXES Secured Amt \$1,248 per month for 60 months, then IRS Tax Liens Real Property Taxes on Retained Realty UNSECURED PRIORITY DEBTS Amount N/A per month for N/A months. IRS Taxes \$10,500 State Taxes **Adequate Protection Payment Period:** 2.38 months. Personal Property Taxes \$65 Alimony or Child Support Arrearage Sch D # = The number of the secued debt as listed on Schedule D. CO-SIGN PROTECT (Pay 100%) Int.% Payoff Amt Adequate Protection = Monthly 'Adequate Protection' payment amt. All Co-Sign Protect Debts (See*) = May include up to 2 post-petition payments. GENERAL NON-PRIORITY UNSECURED Amount** * Co-sign protect on all debts so designated on the filed schedules (Page 4 of 4) DMI= None(\$0) None(\$0) * = Greater of DMI x ACP or EAE Ch13Plan_MD_(DeSardi Version 1/12/10) © LOJTO **Other Miscellaneous Provisions** Plan to allow for 3 "waivers". Interest on EAE at fed. judgment rate Claim of Ford Motor Credit to be paid by Co-Signer, through her Chapter 13 plan. Case 10-81984 Doc 1 Filed 10/29/10 Page 28 of 90

In re	LaShondra Marie Murry	Case No.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		31,	DATE CLAIM WAS INCURRE NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN		O	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 0001 Creditor #: 1 Commerce Bank Attn: Managing Agent RLPSS Customer Service Post Office Box 413658 CT4-1 Kansas City, MO 64141-3658		_	2007 Purchase Money Security Interest 2008 Tracker Marine Pro Team 17' Outboard Boat & Trailer Value \$ 6,660	1	- 10	A T E D	11,603.00	4,943.00
Account No. Commerce Bank, NA Post Office Box 807011 Kansas City, MO 64180-7011			Representing: Commerce Bank				Notice Only	4,545.60
Account No. 7032 Creditor #: 2 Ford Motor Credit Attn: Managing Agent Post Office Box 105697 Atlanta, GA 30348-5697	,	(-	2007 Purchase Money Security Interest 2007 Ford Edge SEL (66,000 miles (-\$525 for mileage) VIN#: 2FMDK38C07BA30180 State Farm Auto Insurance-policy 7341-B07-33A **Debtor has 1/2 Interest with Hus Value \$ 17,010	# 85 band**			18,813.00	1,803.00
Account No. Ford Motor Credit Company** Post Office Box 55000 Drawer 55-953 Detroit, MI 48255-0953			Representing: Ford Motor Credit Value \$				Notice Only	-,
			Т)	Solution Si	ibto is pa		30,416.00	6,746.00

In re	LaShondra Marie Murry	Case No.	
-		Debtor	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	ŀ	P U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Ford Motor Credit** National Bankruptcy Service Center Post Office Box 537901 Livonia, MI 48153-7901			Representing: Ford Motor Credit Value \$	Т	T E D		Notice Only	
Account No. Creditor #: 3 Lee County Tax Collector Attn: Managing Agent P.O. Box 1968 Sanford, NC 27331-1968	x	-	Real Property Taxes (included in escrow) House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband** Value \$ 208,680.00				0.00	0.00
Account No. Lee County Tax Collector Post Office Box 2040 Sanford, NC 27330			Representing: Lee County Tax Collector Value \$				Notice Only	
Account No. 4064 Creditor #: 4 Palace View South By Spinnaker LLC Attn: Managing Agent 4725 North Scottsdale Road, Ste 300 Scottsdale, AZ 85251 Account No.	x	-	2005 Deed of Trust Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband** Value \$ 0.00				3,000.00	3,000.00
Palace View South By Spinnaker LLC Post Office Box 29352 Phoenix, AZ 85038			Representing: Palace View South Value \$				Notice Only	
Sheet 1 of 5 continuation sheets atta Schedule of Creditors Holding Secured Claim		d to	S (Total of the	ubt			3,000.00	3,000.00

In re	LaShondra Marie Murry	Case No.	
-		Debtor	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H W J C		CONTINGEN	I D	ローのPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 5309 Creditor #: 5 Palace View South By Spinnaker LLC Attn: Managing Agent 4725 North Scottsdale Road, Ste 300 Scottsdale, AZ 85251	x	-	Property Owners' Association Dues Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband** Value \$ 0.00	Ť	A T E D		0.00	0.00
Account No. Palace View South By Spinnaker Post Office Box 6685 Hilton Head Island, SC 29938			Representing: Palace View South Value \$				Notice Only	
Account No. 7210 Creditor #: 6 Patelco Credit Union Attn: Managing Agent Post Office Box 2227 Merced, CA 95344-0227		_	2006 Purchase Money Security Interest 2003 Toyota Sequoia SR5 4WD Utility VIN #: 5TDBT44AX3S166098 State Farm Auto Insurance-policy # 85 7341-B07-33A Value \$ 13,275.00				21,383.00	8,108.00
Account No. Patelco Credit Union 156 Second Street San Francisco, CA 94105			Representing: Patelco Credit Union Value \$				Notice Only	3,100.00
Account No. Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495			Representing: Patelco Credit Union Value \$				Notice Only	
Sheet 2 of 5 continuation sheets atta Schedule of Creditors Holding Secured Claim		d to		ubt nis j			21,383.00	8,108.00

In re	LaShondra Marie Murry	Case No	_
-		Debtor	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) Account No. Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495	CODEBTOR	Hu H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN Representing: Patelco Credit Union	COZHIZGEZH	UNLIQUIDATED		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
7005	_		Value \$					
Account No. 7235 Creditor #: 7 Patelco Credit Union Attn: Managing Agent Post Office Box 2227 Merced, CA 95344-0227		-	2003 Cross Collateral Lien 2003 Toyota Sequoia SR5 4WD Utility VIN #: 5TDBT44AX3S166098 State Farm Auto Insurance-policy # 85 7341-B07-33A					
	4	-	Value \$ 13,275.00	+			12,301.00	12,301.00
Patelco Credit Union 156 Second Street San Francisco, CA 94105			Representing: Patelco Credit Union				Notice Only	
			Value \$	_				
Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495			Representing: Patelco Credit Union				Notice Only	
A 7070	+	-	Value \$	+				
Account No. 7270 Creditor #: 8 Patelco Credit Union Attn: Managing Agent Post Office Box 2227 Merced, CA 95344-0227		-	2004 Cross Collateral Lien 2003 Toyota Sequoia SR5 4WD Utility VIN #: 5TDBT44AX3S166098 State Farm Auto Insurance-policy # 85 7341-B07-33A					
		1	Value \$ 13,275.00	C1	<u> </u>	Н	7,837.00	7,837.00
Sheet <u>3</u> of <u>5</u> continuation sheets a Schedule of Creditors Holding Secured Clair		d to	(Total of	Subt		- 1	20,138.00	20,138.00

In re	LaShondra Marie Murry	Case No	_
-		Debtor	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Patelco Credit Union 156 Second Street San Francisco, CA 94105			Representing: Patelco Credit Union	Т	T E D	Notice Only	
Account No.	╁		Value \$				
Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495			Representing: Patelco Credit Union			Notice Only	
Account No. 7205	4	-	Value \$ 2004				
Creditor #: 9 Patelco Credit Union Attn: Managing Agent Post Office Box 2227 Merced, CA 95344-0227		-	Cross Collateral Lien 2003 Toyota Sequoia SR5 4WD Utility VIN #: 5TDBT44AX3S166098 State Farm Auto Insurance-policy # 85 7341-B07-33A				
Account No.	+	\perp	Value \$ 13,275.00			7,272.00	7,272.00
Patelco Credit Union 156 Second Street San Francisco, CA 94105			Representing: Patelco Credit Union			Notice Only	
Account No.	+	-	Value \$				
Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495			Representing: Patelco Credit Union			Notice Only	
			Value \$				
Sheet <u>4</u> of <u>5</u> continuation sheets at Schedule of Creditors Holding Secured Clair		ed to	S (Total of t	his		7,272.00	7,272.00

In re	LaShondra Marie Murry	Case No	_
-		Debtor	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH-ZGEZ	I D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Creditor #: 10 Sedgemoor Property Owners' Assoc Attn: Managing Agent 3201 Argyll Drive Sanford, NC 27332	x		Homeowners' Association Dues House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband** Value \$ 208,680.00	T	ATED		0.00	0.00
Account No. 6171 Creditor #: 11 Toyota Financial Services Attn: Managing Agent Post Office Box 8026 Cedar Rapids, IA 52408		-	2007 Purchase Money Security Interest 2007 Toyota Camry SE Sedan 4dr. VIN #: 4T1BE46K57U633789 State Farm Auto Insurance-policy # 85 7341-B07-33A Value \$ 13,657.00				17,376.00	3,719.00
Account No. Toyota Financial Services Post Office Box 2958 Torrance, CA 90509-2958			Representing: Toyota Financial Services				Notice Only	5,113.00
Account No. 7931 Creditor #: 12 Wells Fargo Home Mortgage Attn: Managing Agent Post Office Box 10335 Des Moines, IA 50306	x		Value \$ 2008 Deed of Trust House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband** Value \$ 208.680.00				220,000,00	44 220 00
Account No. Wells Fargo Home Mortgage Post Office Box 11701 Newark, NJ 07101			Value \$ 208,680.00 Representing: Wells Fargo Home Mortgage Value \$				Notice Only	11,320.00
Sheet 5 of 5 continuation sheets atta Schedule of Creditors Holding Secured Claim		ed to		lubt nis p			237,376.00	15,039.00
C			(Report on Summary of Sc		ota		319,585.00	60,303.00

In re	LaShondra Marie Murry	Case No.
	<u>. </u>	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Debtor

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority

listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

\square Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

Administrative Expenses

Administrative expenses allowed under 11 U.S.C. § 503(b), and any fees and charges assessed against the estate under chapter 123 of title 28 as provided in 11 U.S.C. 507(a)(2).

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re LaShondra Marie Murry

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CONTINGENT CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER C (See instructions.) 2008 Account No. Creditor #: 1 **Federal Income Taxes** Internal Revenue Service 0.00 Post Office Box 21126 Philadelphia, PA 19114-0326 Χ 10,500.00 10,500.00 Account No. **US Attorney's Office** Representing: Middle District **Internal Revenue Service Notice Only** Post Office Box 1858 Greensboro, NC 27502-1858 Account No. Multiple Accounts **Personal Property Taxes** Creditor #: 2 Lee County Tax Collector 0.00 **106 Hillcrest Drive** P.O. Box 1968 Χ Sanford, NC 27331-1968 65.00 65.00 Account No. Lee County Tax Collector Representing: Post Office Box 2040 Lee County Tax Collector **Notice Only** Sanford, NC 27330 Account No. 12/31/2009 Creditor #: 3 Possible Obligation/State Income Taxes North Carolina Dept of Revenue 0.00 Post Office Box 1168 Raleigh, NC 27602-1168 0.00 0.00 Subtotal 0.00 Sheet 1 of 3 continuation sheets attached to

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

10,565.00

10,565.00

In re	LaShondra Marie Murry	Case No.
	<u>*</u>	

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. North Carolina Department of Representing: Revenue North Carolina Dept of Revenue **Notice Only** c/o NC Department of Justice Post Office Box 629 Raleigh, NC 27602-0629 Account No. **North Carolina Department of** Representing: Revenue North Carolina Dept of Revenue **Notice Only** c/o Reginald S. Hinton Post Office Box 25000 Raleigh, NC 27640-5000 Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **3** continuation sheets attached to

(Total of this page)

0.00

0.00

Schedule of Creditors Holding Unsecured Priority Claims

In re LaShondra Marie Murry

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Administrative Expenses

						TYPE OF PRIORITY				
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu Hu	AND CONSIDERATION FOR CLAIM		UNLIQUIDA	ΙEΙ	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY		
Account No. Creditor #: 4 Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615		-	2010 Attorney Fees	Z G E Z T	DATED		2,790.00	2,790.00		
Account No.							-,			
Account No.										
Account No.										
Account No.										
Sheet <u>3</u> of <u>3</u> continuation sheets attack Schedule of Creditors Holding Unsecured Prio		ubt his p			2,790.00	2,790.00				

(Report on Summary of Schedules)

Total

13,355.00

0.00

13,355.00

Best Case Bankruptcy

In re	LaShondra Marie Murry	Case No.	
-		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H V C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I NGEN	LLQUL	DISPUTED) 	AMOUNT OF CLAIM
Account No. 0613			2004	Т	E			
Creditor #: 1 ACS Post Office Box 7051 Utica, NY 13504-7051		-	Student Loan		D			86,484.00
Account No.		Г				Γ	1	
Chase/AFSA 2277 East 220th Street Long Beach, CA 90810			Representing: ACS					Notice Only
Account No.						Γ		
Sun Tech Col 384 Galleria Parkway Madison, MS 39110			Representing: ACS					Notice Only
Account No.						Γ		
US Attorney's Office Middle District Post Office Box 1858 Greensboro, NC 27502-1858			Representing: ACS					Notice Only
			S. (Total of t	Subt)	86,484.00

In re	LaShondra Marie Murry	Case No	
		Debtor ,	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LIQUIDATED	S P U T	AMOUNT OF CLAIM
Account No.				T	E		
US Department of Education Post Office Box 5202 Greenville, TX 75403-5202			Representing: ACS		D		Notice Only
Account No.				T	T		
US Department of Education Post Office Box 13328 Richmond, VA 23225-0328			Representing: ACS				Notice Only
Account No.				T			
US Department of Education Direct Loan Servicing Center Post Office Box 5609 Greenville, TX 75403-5609			Representing: ACS				Notice Only
Account No. 7019			2009	Ī			
Creditor #: 2 Applied Card Bank Post Office Box 17125 Wilmington, DE 19850-7125		-	Credit Card Purchases				2,199.00
Account No.				T	Г		
Applied Card Bank Post Office Box 17120 Wilmington, DE 19886-7120			Representing: Applied Card Bank				Notice Only
Sheet no1 of _14_ sheets attached to Schedule of				Sub	tota	1	2,199.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	2,199.00

In re	LaShondra Marie Murry		Case No	
		Debtor		

Husband, Wife, Joint, or Community CODEBTOR UNLIQUIDATED CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM C AND ACCOUNT NUMBER AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) 2004 Account No. 3504 **Credit Card Purchases** Creditor #: 3 **Bank of America** Post Office Box 15028 Wilmington, DE 19850-5028 2.414.00 Account No. **Bank of America** Representing: Post Office Box 15019 **Bank of America Notice Only** Wilmington, DE 19886-5019 Account No. 7187 2003 **Credit Card Purhases** Creditor #: 4 **Bank of America** Post Office Box 15026 Wilmington, DE 19850-5026 730.00 Account No. Bank of America Representing: Post Office Box 15019 **Bank of America Notice Only** Wilmington, DE 19886-5019 Account No. 2214 2006 **Credit Card Purchases** Creditor #: 5 Bank of America Post Office Box 15026 Wilmington, DE 19850-5026 5,348.00 Sheet no. 2 of 14 sheets attached to Schedule of Subtotal 8,492.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page)

In re	LaShondra Marie Murry	Case No.
_		Debtor ,

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No.	CODEBTOR	C H M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZLLQULDAFED	SPUT		F CLAIM
Bank of America Post Office Box 15019 Wilmington, DE 19886-5019			Representing: Bank of America				Noti	ce Only
Account No. 0086 Creditor #: 6 Best Buy Reward Zone Program c/o Household Bank Post Office Box 80045 Salinas, CA 93912-0045		_	2006 Credit Card Purchases					382.00
Account No. Reward Zone Program Mastercard Post Office Box 5222 Carol Stream, IL 60197-5222			Representing: Best Buy Reward Zone Program				Noti	ce Only
Account No. 7806 Creditor #: 7 Bill Me Later Post Office Box 5018 Lutherville Timonium, MD 21094		_	2006 Credit Card Purchases					999.00
Account No. Bill Me Later Post Office Box 2394 Omaha, NE 68103-2394			Representing: Bill Me Later				Noti	ce Only
Sheet no. 3 of 14 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			1	,381.00

In re	LaShondra Marie Murry	Case No.
-		Debtor

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 0027 Creditor #: 8 Capital One	CODEBTOR	C H H	CONSIDERATION FOR CLAIM. IF CLAIM	UN LIQUIDATED	3	AMOUNT OF CLAIM
Post Office Box 85167 Richmond, VA 23285-5167		-				3,942.00
Account No. Capital One Post Office Box 30285 Salt Lake City, UT 84130-0285			Representing: Capital One			Notice Only
Account No. 5919 Creditor #: 9 Care Credit c/o GE Money Bank Post Office Box 960061 Orlando, FL 32896-0061		-	2007 Credit Card Purchases			1,427.00
Account No. GE Care Credit Post Office Box 981438 El Paso, TX 79998-1438			Representing: Care Credit			Notice Only
Account No. GE Care Credit Post Office Box 981127 El Paso, TX 79998-1127			Representing: Care Credit			Notice Only
Sheet no. <u>4</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	otota s pa		5,369.00

In re	LaShondra Marie Murry	Case No
_	-	Debtor

				_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	Hu H W		CONTI	UNLI	DISPUT	
AND ACCOUNT NUMBER (See instructions above.)	B T O R	J N	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NGENT	ľ	U T E D	AMOUNT OF CLAIM
Account No.				Ţ	A T E D		
GE Money Bank Bankruptcy Dept. Post Office Box 103104 Roswell, GA 30076-3104			Representing: Care Credit				Notice Only
Account No. 1985			2004 Credit Card Purchases				
Creditor #: 10 Chase			Credit Card Furchases				
Cardmember Service		-					
Post Office Box 15298 Wilmington, DE 19850-5298							
							962.00
Account No.							
Chase Post Office Box 15153 Wilmington, DE 19886-5153			Representing: Chase				Notice Only
Account No. 1545			2006				
Creditor #: 11			Credit Card Purchases				
Chase Cardmember Service		-					
Post Office Box 15298							
Wilmington, DE 19850-5298							6,489.00
Account No.							
Chase Post Office Box 15153 Wilmington, DE 19886-5153			Representing: Chase				Notice Only
Sheet no. <u>5</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_		(Total of t	Sub his			7,451.00

In re	LaShondra Marie Murry		Case No	
		Debtor		

Husband, Wife, Joint, or Community UNLLQULDATED CODEBTOR CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM C AND ACCOUNT NUMBER AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. 2153 2006 **Credit Card Purchases** Creditor #: 12 Chase **Cardmember Service** Post Office Box 15298 Wilmington, DE 19850-5298 2,847.00 Account No. Chase Representing: Post Office Box 15153 Chase **Notice Only** Wilmington, DE 19886-5153 Account No. 0138 2006 **Credit Card Purchases** Creditor #: 13 Chase **Cardmember Service** Post Office Box 15298 Wilmington, DE 19850-5298 3,626.00 Account No. Chase Representing: Post Office Box 15153 Chase **Notice Only** Wilmington, DE 19886-5153 Account No. 4740 2006 **Credit Card Purchases** Creditor #: 14 Citi Cards Post Office Box 6500 Sioux Falls, SD 57117-6500 1,294.00 Sheet no. 6 of 14 sheets attached to Schedule of Subtotal 7,767.00

(Total of this page)

Creditors Holding Unsecured Nonpriority Claims

In re	LaShondra Marie Murry		Case No	
		Debtor		

Husband, Wife, Joint, or Community UNLLQULDATED CODEBTOR CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER C AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. Citi Cards Representing: Post Office Box 182564 Citi Cards **Notice Only** Columbus, OH 43218-2564 2006 Account No. 8473 **Credit Card Purchases** Creditor #: 15 Citi Cards Post Office Box 6062 57117 Jacksonville, FL 32232-5165 2,436.00 Account No. 8680 Bernhardt & Strawser, P.A. Representing: 5821 Fairview Road Citi Cards **Notice Only** Suite 100 Charlotte, NC 28209 Account No. Citi Cards Representing: Post Office Box 1873051 Citi Cards **Notice Only** Columbus, OH 43218-3051 Account No. 6779 2007 **Credit Card Purchases** Creditor #: 16 Citi Cards Post Office Box 6500 Sioux Falls, SD 57117-6500 2,363.00 Sheet no. 7 of 14 sheets attached to Schedule of Subtotal 4,799.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page)

In re	LaShondra Marie Murry	Case No.	
_		Debtor	

$\begin{array}{c} \textbf{SCHEDULE F-CREDITORS\ HOLDING\ UNSECURED\ NONPRIORITY\ CLAIMS} \\ \text{(Continuation\ Sheet)} \end{array}$

CREDITOR'S NAME,	C	Нι	usband, Wife, Joint, or Community	Ç	U N	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	R L I Q U I D A T E D	S P U T	AMOUNT OF CLAIM
Account No. 9550] T	T E		
Bernhardt & Strawser, P.A. 5821 Fairview Road Suite 100 Charlotte, NC 28209			Representing: Citi Cards		D		Notice Only
Account No.							
Citi Cards Post Office Box 182564 Columbus, OH 43218-2564			Representing: Citi Cards				Notice Only
Account No. 5413		T	2008	T			
Creditor #: 17 Citibank Post Office Box 769004 San Antonio, TX 78245-9004		-	Personal Loan				2,157.00
Account No.	┢			+			
Citibank Post Office Box 688923 Des Moines, IA 50368-8923			Representing: Citibank				Notice Only
Account No. 7061			2008	Τ			
Creditor #: 18 Citifinancial Bankruptcy Department Post Office Box 140489 Irving, TX 75014-0489		-	Personal Loan				4,955.00
Sheet no. 8 of 14 sheets attached to Schedule of			2	Subt	tota	ıl	7,112.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	7,112.00

In re	LaShondra Marie Murry	Case No	
		Debtor ,	

CREDITOR'S NAME,	000	ı	Isband, Wife, Joint, or Community	CO	UNLI	DISP	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LIQUIDAT	SPUTED	AMOUNT OF CLAIM
Account No.				T	T E D		
Citifinancial, Inc. NC 3232 NC Highway 87 South Sanford, NC 27332-9633			Representing: Citifinancial Bankruptcy Department				Notice Only
Account No.			2010				
Creditor #: 19 Credit Bureau of Greensboro Post Office Box 26140 Greensboro, NC 27402-0040		-	Possible Obligation				0.00
Account No. 5274	\vdash		2003	T			
Creditor #: 20 Dell Financial Services c/o DFS Customer Care Dept. Post Office Box 81577 Austin, TX 78708-1577		-	Credit Card Purchases				1,623.00
Account No.							
Dell Financial Services P.O. Box 6403 Carol Stream, IL 60197-6403			Representing: Dell Financial Services				Notice Only
Account No.			Possible Obligation				
Creditor #: 21 Federal Housing Authority Department of HUD 1500-401 Pine Croft Road Greensboro, NC 27407		-					0.00
Sheet no. 9 of 14 sheets attached to Schedule of				Sub	tota	1	1,623.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,023.00

In re	LaShondra Marie Murry	Case No	
_		Debtor	

$\begin{array}{c} \textbf{SCHEDULE F-CREDITORS\ HOLDING\ UNSECURED\ NONPRIORITY\ CLAIMS} \\ \text{(Continuation\ Sheet)} \end{array}$

						-	
CREDITOR'S NAME,		Hu	usband, Wife, Joint, or Community	6	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		NT I NGEN	LIQUIDATED	S	AMOUNT OF CLAIM
Account No.]⊤	T E		
US Attorney's Office Middle District Post Office Box 1858 Greensboro, NC 27502-1858			Representing: Federal Housing Authority		D		Notice Only
Account No. 7931	t	t	Credit Card Purchases	\top		t	
Creditor #: 22 HC Processing Center Post Office Box 829 Springdale, AR 72765-0829		-					2,186.00
Account No. 380-8	T	T	2008	T		T	
Creditor #: 23 HC Processing Center Post Office Box 829 Springdale, AR 72765-0829		-	Credit Card Purchases				1,700.00
Account No. 5316	╀	╀	2006	+		╁	1,1 00.00
Creditor #: 24 Home Depot P.O. Box 653000 Dallas, TX 75265-3000		_	Credit Card Purchases				4 704 00
A	-	_	2007	\perp	_	┡	1,731.00
Account No. 3522 Creditor #: 25 HSBC Card Services Post Office Box 80084 Salinas, CA 93912-0084		_	2007 Credit Card Purchases				393.00
Sheet no10_ of _14_ sheets attached to Schedule of	1			Subt	toto	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				6,010.00

In re	LaShondra Marie Murry	Case N	0
		Dehtor	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. HSBC Card Services Post Office Box 5222 Carol Stream, IL 60197-5222			Representing: HSBC Card Services		T E D		Notice Only
Account No. 7020 Creditor #: 26 Macy's Post Office Box 8116 Mason, OH 45040		-	2007 Credit Card Purchases				504.00
Account No. Macy's 1345 South 52nd Street Tempe, AZ 85281			Representing: Macy's				Notice Only
Account No. 9069 Creditor #: 27 Metropolitan National Bank Post Office Box 6335 Fargo, ND 58125-6335		-	2006 Credit Card Purchases				525.00
Account No. Elan Financial Services Post Office Box 108 Saint Louis, MO 63166-9801			Representing: Metropolitan National Bank				Notice Only
Sheet no11 of14 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub his			1,029.00

In re	LaShondra Marie Murry	Case No.	
-		Debtor	

CREDITOR'S NAME,	С	Ηu	usband, Wife, Joint, or Community	C	U N	Ţ	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LIQUI		S P U T E	AMOUNT OF CLAIM
Account No. Metropolitan National Bank			Representing:	T	D A T E D	 -		
Post Office Box 790408 Saint Louis, MO 63179-0408			Metropolitan National Bank					Notice Only
Account No.			2010			T		
Creditor #: 28 North Carolina Employment Security Commission Post Office Box 26504 Raleigh, NC 27611-6504		-	Possible Obligation					
								0.00
Account No. 4513			2003 Credit Card Purchases					
Creditor #: 29 Shell Card Center			Credit Gard Furchases					
P.O. Box 6406		-						
Sioux Falls, SD 57117-6406								
								805.00
Account No.								
Shell Credit Card Center			Representing:					
P.O. Box 183018 Columbus, OH 43218-3018			Shell Card Center					Notice Only
Columbus, On 43216-3016								
Account No. 6743			2006	+	t	\dagger	-	
Creditor #: 30			Credit Card Purchases					
US Bank Post Office Box 6352		-						
Fargo, ND 58125-6352								
								978.00
Sheet no. 12 of 14 sheets attached to Schedule of		_		Sub				1,783.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	-,

In re	LaShondra Marie Murry	Case No.
-		Debtor

·	_			_			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H H	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	UNLLQULD	DISPUTED	AMOUNT OF CLAIM
Account No.				Ψ̈́	ΙA		
US Bank Post Office Box 790408 Saint Louis, MO 63179-0408			Representing: US Bank		E D		Notice Only
Account No. 8589			2003				
Creditor #: 31 US Bank Post Office Box 6335 Fargo, ND 58125-6335		-	Credit Card Purchases				
							2,749.00
Account No.							
US Bank Post Office Box 790408 Saint Louis, MO 63179-0408			Representing: US Bank				Notice Only
Account No. 7346			2006				
Creditor #: 32 Wal-Mart Post Office Box 103104 Roswell, GA 30076		-	Credit Card Purchases				
							226.00
Account No. Wal-Mart Post Office Box 981470 El Paso, TX 79998-1470			Representing: Wal-Mart				Notice Only
Sheet no13_ of _14_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		_	(Total of t	Sub his			2,975.00

In re	LaShondra Marie Murry	Case No	
_		Debtor	

Husband, Wife, Joint, or Community CODEBTOR UNLLQULDATED CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM C AND ACCOUNT NUMBER AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. Wal-Mart Representing: c/o GE Money Bank - BK Department Wal-Mart **Notice Only** Post Office Box 103104 Roswell, GA 30076 Account No. Account No. Account No. Account No. Sheet no. 14 of 14 sheets attached to Schedule of Subtotal 0.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total 144,474.00

(Report on Summary of Schedules)

In re	LaShondra Marie Murry	Case No	
	-		

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Debtor

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

CPI Security 4200 Sandy Porter Road Charlotte, NC 28273

Type of Contract: Service Contract **Description: Home Security Monitoring** Terms: \$36.95 per month for 36 months.

Buyout Option: None Beginning Date: 07/15/2008 **Debtor's Interest: Purchaser Debtor's Intention: Assume**

Terminix Post Office Box 2587 Fayetteville, NC 28302-2587 Type of Contract: Service Contract

Description: Pest Control

Terms: \$85.00 per quarter (At Will Contract)
Buyout Option: None

Beginning Date: 2008 **Debtor's Interest: Purchaser Debtor's Intention: Assume**

•	
ln	rΔ

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Tracy Lee Murry 3251 Bristol Street Sanford, NC 27332	Ford Motor Credit Attn: Managing Agent Post Office Box 105697
	Atlanta, GA 30348-5697
Tracy Lee Murry	Lee County Tax Collector
3251 Bristol Street	Attn: Managing Agent
Sanford, NC 27332	P.O. Box 1968 Sanford, NC 27331-1968
Tracy Lee Murry	Palace View South
3251 Bristol Street	By Spinnaker LLC
Sanford, NC 27332	Attn: Managing Agent
	4725 North Scottsdale Road, Ste 300 Scottsdale, AZ 85251
Tracy Lee Murry	Palace View South
3251 Bristol Street	By Spinnaker LLC
Sanford, NC 27332	Attn: Managing Agent
	4725 North Scottsdale Road, Ste 300 Scottsdale, AZ 85251
Tracy Lee Murry	Sedgemoor Property Owners' Assoc
3251 Bristol Street	Attn: Managing Agent
Sanford, NC 27332	3201 Argyll Drive
	Sanford, NC 27332
Tracy Lee Murry	Wells Fargo Home Mortgage
3251 Bristol Street	Attn: Managing Agent
Sanford, NC 27332	Post Office Box 10335
	Des Moines, IA 50306
Tracy Lee Murry	Internal Revenue Service
3251 Bristol Street	Post Office Box 21126
Sanford, NC 27332	Philadelphia, PA 19114-0326
Tracy Lee Murry	Lee County Tax Collector
3251 Bristol Street	106 Hillcrest Drive
Sanford, NC 27332	P.O. Box 1968
	Sanford, NC 27331-1968

In re	LaShondra Marie Murry		Case No.	
		Debtor(s)		

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS	OF DEBTOR AND	SPOUSE		
Debtor's Maritar Status.	RELATIONSHIP(S):	AGE(S			
Married	Mother Child		61 7		
Employment:	DEBTOR		SPOUSE		
Occupation	Pharmacist	Self Emplo	yed		
Name of Employer	CVS Caremark				
How long employed	2 years	3 months			
Address of Employer	522 Owen Drive				
	Fayetteville, NC 28304				
INCOME: (Estimate of average of	or projected monthly income at time case filed)	•	DEBTOR		SPOUSE
	nd commissions (Prorate if not paid monthly)	\$	11,282.10	\$	0.00
2. Estimate monthly overtime	•	\$	0.00	\$	0.00
3. SUBTOTAL		\$	11,282.10	\$	0.00
		<u>L</u>			
4. LESS PAYROLL DEDUCTION	NS	_			
a. Payroll taxes and social se		\$	3,276.25	\$	0.00
b. Insurance	centry	\$	269.00	\$ 	0.00
c. Union dues		\$	0.00	\$ 	0.00
	e Detailed Income Attachment	\$	474.42	\$ 	0.00
a. suite (speedly)				<u> </u>	0.00
5. SUBTOTAL OF PAYROLL DI	EDUCTIONS	\$	4,019.67	\$	0.00
6. TOTAL NET MONTHLY TAK	KE HOME PAY	\$	7,262.43	\$	0.00
	of business or profession or farm (Attach detailed st	atement) \$	0.00	\$	6.06
8. Income from real property		\$	0.00	\$	0.00
9. Interest and dividends		\$	0.00	\$	0.00
10. Alimony, maintenance or suppression dependents listed above	port payments payable to the debtor for the debtor's u	se or that of \$	0.00	\$	0.00
11. Social security or government	assistance				
(Specify):			0.00	\$	0.00
			0.00	\$	0.00
12. Pension or retirement income		\$	0.00	\$	0.00
13. Other monthly income					
(Specify):			0.00	\$	0.00
			0.00	\$	0.00
14. SUBTOTAL OF LINES 7 TH	ROUGH 13	\$	0.00	\$	6.06
15. AVERAGE MONTHLY INCO	OME (Add amounts shown on lines 6 and 14)	\$	7,262.43	\$	6.06
16. COMBINED AVERAGE MO	NTHLY INCOME: (Combine column totals from lin	e 15)	\$	7,268.4	19

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **Debtor's Spouses' unemployment benefits ended as of October 2010.**

In re	LaShondra Marie Murry	Case No.
III I C	Lacriciara maric mari	Case Ivo.

Debtor(s)

$\underline{\textbf{SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)}}$

Detailed Income Attachment

Other	Payroll	Deductions:
-------	---------	--------------------

401K Contributions	\$ 112.82	\$ 0.00
401K Loan Repayment	\$ 59.05	\$ 0.00
Health Care Reimbursement Account	\$ 233.97	\$ 0.00
Long term Disability	\$ 68.58	\$ 0.00
Total Other Payroll Deductions	\$ 474.42	\$ 0.00

In re	LaShondra Marie Murry		Case No.	
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

■ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,619.47
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	225.00
b. Water and sewer	\$	100.00
c. Telephone	\$	85.00
d. Other See Detailed Expense Attachment	\$	385.00
3. Home maintenance (repairs and upkeep)	\$	25.00
4. Food	\$	752.00
5. Clothing	\$	25.00
6. Laundry and dry cleaning	\$	7.79
7. Medical and dental expenses	\$	450.00
8. Transportation (not including car payments)	\$	478.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	25.00
10. Charitable contributions	\$	433.33
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	80.00
c. Health	\$	0.00
d. Auto	\$	180.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) Personal Property Taxes	\$	100.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the		
plan)		
a. Auto	\$	0.00
b. Other See Detailed Expense Attachment	\$	268.82
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	1,391.75
10 AVED ACE MONTHLY EXPENDED (T. 11' 117 D 1 C	Φ.	0.004.40
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules	\$	6,631.16
and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
None	_	
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	7,268.49
b. Average monthly expenses from Line 18 above	\$	7,268.49
c. Monthly net income (a. minus b.)	\$	0.00

the filing of this document:

In re LaShondra Marie Murry

Debtor(s)

Case No.

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

(Spouse's Schedule)

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? Yes No _X		
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	0.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	0.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	0.00
8. Transportation (not including car payments)	\$	0.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other	\$	0.00
e. Other		
(Specify) Personal Property Taxes	\$	50.00
13. Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the		
plan.)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	316.33
15. Payments for support of additional dependents not living at your home	\$	0.00
16 Regular expenses from operation of business profession, or farm (attach detailed statement)	\$	0.00
17. Other Chapter 13 Plan Payment	\$	271.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	637.33
19 Describe any increase or decrease in expenditures anticipated to occur within the year following	<u> </u>	

In re **LaShondra Marie Murry**

Debtor(s)

Case No.

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Detailed Expense Attachment

Other Utility Expenditures:

Cell Phones	\$	180.00
Cable	<u> </u>	165.00
Internet	\$	40.00
Total Other Utility Expenditures	\$	385.00
Other Installment Payments:		
Palace View South TimeShare	\$	140.20
Palace View South Property Owners' Association Dues	<u> </u>	21.67
Sedgemoor Property Owner's Assocition (Residence)	<u> </u>	41.67
Terminix	<u> </u>	28.33
CPI Security	\$	36.95
Total Other Installment Payments	\$	268.82
Other Expenditures:		
Personal Grooming	\$	25.00
Housekeeping	<u> </u>	50.00
Emergency	<u> </u>	25.00
Chapter 13 Plan Payment	<u> </u>	1,248.00
Education For Condition Of Employment	<u> </u>	18.75
Miscellaneous	\$	25.00
Total Other Expenditures	\$	1,391.75

B22C (Official Form 22C) (Chapter 13) (04/10)

In re	LaShondra Marie Murry	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case N		■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		\square Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INC	COME						
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.							
	b. Married. Complete both Column A ("Debtor's Income") and Co		ome	'') for Lines 2-	10.			
	All figures must reflect average monthly income received from all source six calendar months prior to filing the bankruptcy case, ending on the las before the filing. If the amount of monthly income varied during the six divide the six-month total by six, and enter the result on the appropriate		Column A Debtor's Income		Column B Spouse's Income			
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$	11,282.10	\$	0.00			
3	Income from the operation of a business, profession, or farm. Subtra and enter the difference in the appropriate column(s) of Line 3. If you op business, profession or farm, enter aggregate numbers and provide detail not enter a number less than zero. Do not include any part of the busin on Line b as a deduction in Part IV.	erate more than one is on an attachment. Do ness expenses entered						
	a. Gross receipts \$ 0.00	Spouse 480.89						
		\$ 474.83						
	c. Business income Subtract Line b from	Line a	\$	0.00	\$	6.06		
4	Rents and other real property income. Subtract Line b from Line a an in the appropriate column(s) of Line 4. Do not enter a number less than any part of the operating expenses entered on Line b as a deduction Debtor a. Gross receipts \$ 0.00	zero. Do not include in Part IV. Spouse						
	b. Ordinary and necessary operating expenses \$ 0.00							
		\$ 0.00	\$	0.00	\$	0.00		
5	b. Ordinary and necessary operating expenses \$ 0.00	\$ 0.00	\$	0.00	\$	0.00		
5	b. Ordinary and necessary operating expenses \$ 0.00 c. Rent and other real property income Subtract Line b from	\$ 0.00	Ψ		-			
	b. Ordinary and necessary operating expenses \$ 0.00 c. Rent and other real property income Subtract Line b from Interest, dividends, and royalties.	\$ 0.00 a Line a or the household apport paid for that	\$	0.00	\$	0.00		
6	b. Ordinary and necessary operating expenses \$ 0.00 c. Rent and other real property income Subtract Line b from Interest, dividends, and royalties. Pension and retirement income. Any amounts paid by another person or entity, on a regular basis, fo expenses of the debtor or the debtor's dependents, including child su purpose. Do not include alimony or separate maintenance payments or a	s 0.00 n Line a or the household apport paid for that amounts paid by the amn(s) of Line 8. ou or your spouse was a appensation in Column A	\$	0.00	\$	0.00		

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9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.		
	Debtor Spouse		
		00 \$	0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). \$\\$11,282.\$	10 \$	6.06
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		11,288.16
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD		
12	Enter the amount from Line 11	\$	11,288.16
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S	\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	<u> </u>	
14		\$	11,288.16
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	135,457.92
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: NC b. Enter debtor's household size: 4	\$	67,056.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment the top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment years" at the top of page 1 of this statement and continue with this statement. 		•
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME		
18	Enter the amount from Line 11.	\$	11,288.16
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ b. \$ c. \$ \$ c. \$ \$		
	Total and enter on Line 19.	\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	11,288.16

				0 1/10)	orm 22C) (Chapter 13) ((Olliciai I	D22 0 (0
135,457.92	20 by the number 12 and	ly the amount from Line	. Mu	come for § 1325(b)(3).	dized current monthly inche result.		21
67,056.00	Applicable median family income. Enter the amount from Line 16.						22
determined under	Application of § 1325(b)(3). Check the applicable box and proceed as directed. ■ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined and complete the remaining parts of this statement. □ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete						
	OM INCOME	EDUCTIONS FR	OF	ALCULATION (Part IV. CA		
	nue Service (IRS)	of the Internal Reve	ında	eductions under Star	Subpart A: Do		
1,371.00	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	ional Standards for lable at ber of members of your f your household who are he number stated in Line 65, and enter the result 65 and older, and enter the result in Line 24B.	d in Line a2 the IRS Nat (This information is available of the number of members of rs must be the same as tousehold members under for household members	of age or old cour Line I d me unt for l amo	rsons under 65 years of rsons 65 years of age or clerk of the bankruptcy cs of age, and enter in Lital number of household 1 to obtain a total amount ine b2 to obtain a total and c2 to obtain a total	al Standards: health care for per-Pocket Health Care for the condition who are under 65 years of age or older. (The total Multiply Line all by Line beto call Multiply Line all by Line beto call Multiply Line all by Lult in Line c2. Add Lines call Health Care for the care for per-Pocket Health Care for per-Poc	Out-of- Out-of- www.u househ 65 year 16b.) M in Line the res	24B
	144	Allowance per member		60	Allowance per member	a1.	
	0	Number of members		4	Number of members	b1.	
240.00	0.00	Subtotal	c 2	240.00	Subtotal	c1.	
540.00	the IRS Housing and	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					25A
0.00	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent Expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a.					Housin availab Averag and en b.	25B
	et out in Lines 25A and Housing and Utilities	ontend that the process s e entitled under the IRS	h you	utilities; adjustment. I the allowance to which	Standards: housing and uses not accurately computerds, enter any additional action in the space below:	Local 25B do Standa	26
0.00							

	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.						
27A	Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. \square 0 \square 1 \square 2 or more.						
	If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local						
	Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$	478.00				
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$	0.00				
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) $\Box 1 = 2$ or more.						
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.						
	a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle						
	b. 1, as stated in Line 47 \$ 250.52						
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	\$	245.48				
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.						
	a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle b. 2 as stated in Line 47 \$ 257.72						
	b. 2, as stated in Line 47 \$ 257.72 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$	238.28				
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	\$	3,376.25				
31	Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$	0.00				
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	\$	80.00				
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.	\$	316.33				
33	pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not	\$	316.33				

care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you account ly pay for telecommunication services of the training that the savings accounts of the savings accounts listed in Line 39. Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines act below that are reasonably necessary for yourself, your spouse, or your dependents. Health Insurance S 269.00 b Disability Insurance S 269.00 b Disability Insurance S 269.00 b Disability Insurance S 269.00 c Health Savings Account S 233.97 Total and enter on Line 39 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually expenses. Do not include payments listed in Line 34. Schodards for Housing and Utilities, that you actually expenses of the allowance specified by IRS Local Schodards for Housing and Utilities, that you actually expenses for the payments of these expenses; and		Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health		
Deyments for health insurance or health savings accounts listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service-such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ \$ 68.58	36	care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance		
actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service- to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. Be a Health Insurance			\$	210.00
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a	37	actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and	\$	40.00
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ 269.00 b. Disability Insurance \$ 5 68.58 c. C. Health Savings Account \$ 233.97 c. Total and enter on Line 39 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: S Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. 41 42 42 43 44 45 46 47 48 48 49 49 40 Home energy costs. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. 40 41 42 42 43 44 45 46 47 48 48 49 49 49 40 40 40 40 40 41 41 42 42 43 44 45 45 46 46 47 48 48 49 49 49 40 40 40 40 40 40 40	38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	7,154.09
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ 269.00		Subpart B: Additional Living Expense Deductions		
in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance		Note: Do not include any expenses that you have listed in Lines 24-37		
b. Disability Insurance		in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your		
C. Health Savings Account \$ 233.97 Total and enter on Line 39 \$ 571.55 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: S Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. \$ 0.00	39	a. Health Insurance \$ 269.00		
Total and enter on Line 39 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: S Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. S Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$% of those combined allowances (This information is available at www.usdoj.gov/ust/ or from the c		b. Disability Insurance \$ 68.58		
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Yo		c. Health Savings Account \$ 233.97		
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Deducation expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the am		Total and enter on Line 39	\$	571.55
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptey court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				
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expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Solution expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or fin				
actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	40	expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such	\$	0.00
Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 433.33	41	actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or	\$	0.00
Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 433.33	42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional		
actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. 433.33			Þ	0.00
Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 433.33	43	actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with		
expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 433.33			\$	0.00
Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 433.33	44	expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is	\$	0.00
	45	contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. §		
	46			

47

Subpart C: Deductions for Debt Payment

Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.

	Name of Creditor	Property Securing the Debt	Average Monthly	Does payment include taxes
		10000 Taraka Maria Bara	Payment	or insurance
a.	Commerce Bank	2008 Tracker Marine Pro Team 17' Outboard Boat & Trailer	\$ 125.68	□yes ■no
b.	Ford Motor Credit	2007 Ford Edge SEL (66,000 miles) (-\$525 for mileage) VIN#: 2FMDK38C07BA30180 State Farm Auto Insurance-policy # 85 7341-B07-33A **Debtor has 1/2 Interest with Husband**	\$ 321.00	□yes ■no
c.	Palace View South	Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband**	\$ 21.67	□yes ■no
d.	Palace View South	Timeshare: Unit # 723 O Period 9 Yellow Branson, MO **Debtor has 1/2 Interest with Husband**	\$ 140.20	□yes ■no
e.	Patelco Credit Union	2003 Toyota Sequoia SR5 4WD Utility VIN #: 5TDBT44AX3S166098 State Farm Auto Insurance-policy # 85 7341-B07-33A	\$ 250.52	□yes ■no
f.	Sedgemoor Property Owners' Assoc	House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband**	\$ 41.67	□yes ■no
g.	Toyota Financial Services	2007 Toyota Camry SE Sedan 4dr. VIN #: 4T1BE46K57U633789 State Farm Auto Insurance-policy # 85 7341-B07-33A	\$ 257.72	□yes ■no
h.	Wells Fargo Home Mortgage	House & Land: 3251 Bristol Street Sanford, NC 27332 **Taxes are ESCROWED** **Debtor has 1/2 Interest with Husband**	\$ 1,619.47 otal: Add Lines	■yes □no

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Best Case Bankruptcy

48	payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.					in		
	Name of Creditor aNONE-	Property Securing the Debt	\$	1/60th	of the Cu	re Amount	1	
	a. -NONE-		φ		Total:	Add Lines	\$	0.00
49	Payments on prepetition priority of priority tax, child support and alimor Do not include current obligations,	y claims, for which you were liable a					\$	222.58
	Chapter 13 administrative expense resulting administrative expense.	s. Multiply the amount in Line a by t	he amou	ınt in Line	b, and e	enter the		
50	a. Projected average monthly C		\$			1,248.00]	
50		istrict as determined under schedules ce for United States Trustees. (This	S					
	information is available at w	ww.usdoj.gov/ust/ or from the clerk of	of					
	the bankruptcy court.)		X	3.6.1.2.1	т.	6.00		74.00
		ive expense of Chapter 13 case	*	: Multiply	Lines a	and b	\$	74.88
51	Total Deductions for Debt Paymen	t. Enter the total of Lines 47 through	i 50.				\$	3,075.39
	5	Subpart D: Total Deductions	from I	ncome				
52	Total of all deductions from incom-	e. Enter the total of Lines 38, 46, and	d 51.				\$	11,234.36
	Part V. DETERMI	NATION OF DISPOSABLE	INCO	ME UN	DER 8	1325(b)((2)	
53	Total current monthly income. En					1020(0)(\$	11,288.16
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptc law, to the extent reasonably necessary to be expended for such child.					0.00		
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).				s \$	171.87		
	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.				\$	11,234.36		
56	Total of all deductions allowed und	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.					<u> </u>	
	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tr	ive, describe the special circumstance l entries on a separate page. Total the ustee with documentation of these of	es and the e expense expenses	ne resulting ses and end s and you	g expens ter the to must p i	es in lines tal in Line rovide a		
56 57	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tr	ive, describe the special circumstance l entries on a separate page. Total the ustee with documentation of these e circumstances that make such expe	es and the expense expense nec	ne resulting ses and end s and you	g expens ter the to must pr d reason	es in lines tal in Line rovide a		
	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tradetailed explanation of the special	ive, describe the special circumstance l entries on a separate page. Total the ustee with documentation of these e circumstances that make such expe	es and the expense expenses nec	ne resultinges and enters and you eessary and	g expens ter the to must pr d reason	es in lines tal in Line rovide a		
	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tr detailed explanation of the special Nature of special circumstance a. b.	ive, describe the special circumstance l entries on a separate page. Total the ustee with documentation of these e circumstances that make such expe	es and the expense expense nec	ne resultinges and enters and you eessary and	g expens ter the to must pr d reason	es in lines tal in Line rovide a		
	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tradetailed explanation of the special Nature of special circumstance a.	ive, describe the special circumstance l entries on a separate page. Total the ustee with documentation of these e circumstances that make such expe	Amor	ne resulting ses and end s and you sessary and unt of Exp	g expens ter the to must pr d reason ense	es in lines tal in Line rovide a		0.00
57	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tridetailed explanation of the special Nature of special circumstance a. b. c.	ive, describe the special circumstance lentries on a separate page. Total the ustee with documentation of these ecircumstances that make such expenses	Amor	ne resulting ses and ender ses and you sessary and unt of Exp	g expens ter the to must pr d reason ense	es in lines tal in Line rovide a nable.	\$	0.00
	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tr detailed explanation of the special Nature of special circumstance a. b.	ive, describe the special circumstance lentries on a separate page. Total the ustee with documentation of these ecircumstances that make such expenses	Amor	ne resulting ses and ender ses and you sessary and unt of Exp	g expens ter the to must pr d reason ense	es in lines tal in Line rovide a nable.	\$	0.00
57	Deduction for special circumstance which there is no reasonable alternat a-c below. If necessary, list additiona 57. You must provide your case tridetailed explanation of the special Nature of special circumstance a. b. c. Total adjustments to determine dis	posable income. Add the amounts of	es and the expense expense ense nec Amore \$ \$ \$ Total on Lines	the resulting the resulting set and entress and you the resulting the resulting set and you have a set of the resulting set and you have a set of the resulting set and you have a set of the resulting set and you have a set of the resulting set and you have a set of the resulting set of t	g expense the to must produce the to must produce the sees the see	es in lines tal in Line rovide a nable. and enter		

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

60

	Expense Description	Monthly Amount
a.		\$
b.		\$
c.		\$
d.		\$
	Total: Add Lines a, b, c and d	\$

Part VII. VERIFICATION						
61	debtors must sign.)	perjury that the information proctober 29, 2010		true and correct. (If this is a joint case, both /s/ LaShondra Marie Murry LaShondra Marie Murry (Debtor)		

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaShondra Marie Murry		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$106,210.00	LaShondra Murry
	2010 CVS Pharmacy
\$129,162.00	2009 CVS Pharmacy
\$187,047.00	2008 Walgreens Pharmacy/CVS Pharmacy
\$2,885.34	Tracy Murry
	2010 Murry Lawn Care Services
\$0.00	2009 None
\$21,607.00	2008 CC Staffing/Charles River

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Case 10-81984 Doc 1 Filed 10/29/10 Page 70 of 90

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$11,946.00 Tracy Murry**

2010 Unemployment Compensation

\$15,917.00 2009 Unemployment Compensation \$1,735.00 2008 Unemployment Compensation

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
Paid ordinary payments, in part, on bills and loans.

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

\$0.00 \$0.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS

PAID OR VALUE OF AMOUNT STILL TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Cornerstone Christian Empowerment Center 707 Bragg Street RELATIONSHIP TO DEBTOR, IF ANY N/A

DATE OF GIFT 10/2009 to Present DESCRIPTION AND VALUE OF GIFT Description: Money Value: \$5,200.00

Sanford, NC 27332

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$210.00

The Law Offices of John T. Orcutt, PC 6616-203 Six Forks Road Raleigh, NC 27615

Hummingbird Credit Counseling 3737 Glenwood Avenue Suite 100 Raleigh, NC 27612 \$34.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER. IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 38 Westfield Court Little Rock, AR 72210 NAME USED **Tracy Lee Murry** LaShondra Marie Murry DATES OF OCCUPANCY 07/2003 to 03/2008

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	October 29, 2010	Signature	/s/ LaShondra Marie Murry
			LaShondra Marie Murry
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaShondra Marie Murry			Case No.			
		Debtor(s	Debtor(s)	Chapter	13		
	DECLARATION CONCERNING DEBTOR'S SCHEDULES						
	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR						
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.						
Date	October 29, 2010	Signature	/s/ LaShondra Marie M	-			

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

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North Carolina Department of Revenue c/o NC Department of Justice Post Office Box 629 Raleigh, NC 27602-0629

North Carolina Employment Security Commission Post Office Box 26504 Raleigh, NC 27611

Credit Bureau Post Office Box 26140 Greensboro, NC 27402

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

Equifax Information Systems LLC P.O. Box 740241 Atlanta, GA 30374-0241

Experian P.O. Box 2002 Allen, TX 75013-2002

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2000

ChexSystems Attn: Consumer Relations 7805 Hudson Road, Ste. 100 Woodbury, MN 55125

Internal Revenue Service (MD) **
Post Office Box 21126
Philadelphia, PA 19114-0326

US Attorney's Office (MD)**
Middle District
Post Office Box 1858
Greensboro, NC 27502-1858

ACS Post Office Box 7051 Utica, NY 13504-7051

Applied Card Bank Post Office Box 17125 Wilmington, DE 19850-7125

Applied Card Bank Post Office Box 17120 Wilmington, DE 19886-7120

Bank of America Post Office Box 15028 Wilmington, DE 19850-5028

Bank of America Post Office Box 15026 Wilmington, DE 19850-5026

Bank of America Post Office Box 15019 Wilmington, DE 19886-5019

Bernhardt & Strawser, P.A. 5821 Fairview Road Suite 100 Charlotte, NC 28209

Best Buy Reward Zone Program c/o Household Bank Post Office Box 80045 Salinas, CA 93912-0045

Bill Me Later Post Office Box 5018 Lutherville Timonium, MD 21094

Bill Me Later Post Office Box 2394 Omaha, NE 68103-2394

Capital One Post Office Box 85167 Richmond, VA 23285-5167 Capital One Post Office Box 30285 Salt Lake City, UT 84130-0285

Care Credit c/o GE Money Bank Post Office Box 960061 Orlando, FL 32896-0061

Chase Cardmember Service Post Office Box 15298 Wilmington, DE 19850-5298

Chase Post Office Box 15153 Wilmington, DE 19886-5153

Chase/AFSA 2277 East 220th Street Long Beach, CA 90810

Citi Cards
Post Office Box 6500
Sioux Falls, SD 57117-6500

Citi Cards Post Office Box 6062 57117 Jacksonville, FL 32232-5165

Citi Cards Post Office Box 182564 Columbus, OH 43218-2564

Citi Cards Post Office Box 1873051 Columbus, OH 43218-3051

Citibank
Post Office Box 769004
San Antonio, TX 78245-9004

Citibank Post Office Box 688923 Des Moines, IA 50368-8923

Citifinancial Bankruptcy Department Post Office Box 140489 Irving, TX 75014-0489

Citifinancial, Inc. NC 3232 NC Highway 87 South Sanford, NC 27332-9633

Commerce Bank
Attn: Managing Agent
RLPSS Customer Service
Post Office Box 413658 CT4-1
Kansas City, MO 64141-3658

Commerce Bank, NA Post Office Box 807011 Kansas City, MO 64180-7011

CPI Security 4200 Sandy Porter Road Charlotte, NC 28273

Credit Bureau of Greensboro Post Office Box 26140 Greensboro, NC 27402-0040

Dell Financial Services c/o DFS Customer Care Dept. Post Office Box 81577 Austin, TX 78708-1577

Dell Financial Services P.O. Box 6403 Carol Stream, IL 60197-6403

Elan Financial Services Post Office Box 108 Saint Louis, MO 63166-9801 Federal Housing Authority Department of HUD 1500-401 Pine Croft Road Greensboro, NC 27407

Ford Motor Credit Attn: Managing Agent Post Office Box 105697 Atlanta, GA 30348-5697

Ford Motor Credit Company**
Post Office Box 55000
Drawer 55-953
Detroit, MI 48255-0953

Ford Motor Credit**
National Bankruptcy Service Center
Post Office Box 537901
Livonia, MI 48153-7901

GE Care Credit Post Office Box 981438 El Paso, TX 79998-1438

GE Care Credit Post Office Box 981127 El Paso, TX 79998-1127

GE Money Bank Bankruptcy Dept. Post Office Box 103104 Roswell, GA 30076-3104

HC Processing Center Post Office Box 829 Springdale, AR 72765-0829

Home Depot P.O. Box 653000 Dallas, TX 75265-3000

HSBC Card Services Post Office Box 80084 Salinas, CA 93912-0084 HSBC Card Services Post Office Box 5222 Carol Stream, IL 60197-5222

Internal Revenue Service Post Office Box 21126 Philadelphia, PA 19114-0326

Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615

Lee County Tax Collector 106 Hillcrest Drive P.O. Box 1968 Sanford, NC 27331-1968

Lee County Tax Collector Attn: Managing Agent P.O. Box 1968 Sanford, NC 27331-1968

Lee County Tax Collector Post Office Box 2040 Sanford, NC 27330

Macy's Post Office Box 8116 Mason, OH 45040

Macy's 1345 South 52nd Street Tempe, AZ 85281

Metropolitan National Bank Post Office Box 6335 Fargo, ND 58125-6335

Metropolitan National Bank Post Office Box 790408 Saint Louis, MO 63179-0408 North Carolina Department of Revenue c/o Reginald S. Hinton Post Office Box 25000 Raleigh, NC 27640-5000

North Carolina Dept of Revenue Post Office Box 1168 Raleigh, NC 27602-1168

North Carolina Employment Security Commission Post Office Box 26504 Raleigh, NC 27611-6504

Palace View South By Spinnaker LLC Attn: Managing Agent 4725 North Scottsdale Road, Ste 300 Scottsdale, AZ 85251

Palace View South By Spinnaker LLC Post Office Box 29352 Phoenix, AZ 85038

Palace View South By Spinnaker Post Office Box 6685 Hilton Head Island, SC 29938

Patelco Credit Union Attn: Managing Agent Post Office Box 2227 Merced, CA 95344-0227

Patelco Credit Union 156 Second Street San Francisco, CA 94105

Patelco Credit Union Post Office Box 30495 Tampa, FL 33630-3495 Reward Zone Program
Mastercard
Post Office Box 5222
Carol Stream, IL 60197-5222

Sedgemoor Property Owners' Assoc Attn: Managing Agent 3201 Argyll Drive Sanford, NC 27332

Shell Card Center P.O. Box 6406 Sioux Falls, SD 57117-6406

Shell Credit Card Center P.O. Box 183018 Columbus, OH 43218-3018

Sun Tech Col 384 Galleria Parkway Madison, MS 39110

Terminix
Post Office Box 2587
Fayetteville, NC 28302-2587

Toyota Financial Services Attn: Managing Agent Post Office Box 8026 Cedar Rapids, IA 52408

Toyota Financial Services Post Office Box 2958 Torrance, CA 90509-2958

Tracy Lee Murry 3251 Bristol Street Sanford, NC 27332

US Attorney's Office Middle District Post Office Box 1858 Greensboro, NC 27502-1858 US Bank Post Office Box 6352 Fargo, ND 58125-6352

US Bank Post Office Box 6335 Fargo, ND 58125-6335

US Bank Post Office Box 790408 Saint Louis, MO 63179-0408

US Department of Education Post Office Box 5202 Greenville, TX 75403-5202

US Department of Education Post Office Box 13328 Richmond, VA 23225-0328

US Department of Education Direct Loan Servicing Center Post Office Box 5609 Greenville, TX 75403-5609

Wal-Mart Post Office Box 103104 Roswell, GA 30076

Wal-Mart Post Office Box 981470 El Paso, TX 79998-1470

Wal-Mart c/o GE Money Bank - BK Department Post Office Box 103104 Roswell, GA 30076

Wells Fargo Home Mortgage Attn: Managing Agent Post Office Box 10335 Des Moines, IA 50306 Wells Fargo Home Mortgage Post Office Box 11701 Newark, NJ 07101

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	LaSnondra Marie Murry		Case No.	
	•	Debtor(s)	Chapter	13
	VER	IFICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and con	rrect to the bes	t of his/her knowledge.
Date:	October 29, 2010	/s/ LaShondra Marie Murry LaShondra Marie Murry		
		Signature of Debtor		